[Name of Customer Agency]

Requirements CHANGE REQUEST FORM

[Program Name]

Version 1.0

[Day, Month, Year]

Document History

|  |  |  |  |
| --- | --- | --- | --- |
| Release No. | Date | Author | Revision Description |
| 1.0 |  |  | Initial Draft Version |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I have carefully assessed the Requirements Change Request Formforthe *<<INSERT NAME OF PROGRAM>>.* This document has been completed in accordance with the requirements of the Office of Shared Solutions and Performance Improvement (OSSPI) Guidance.

MANAGEMENT CERTIFICATION - Please check the appropriate statement.

\_\_\_\_\_\_ The document is accepted.

\_\_\_\_\_\_ The document is accepted pending the changes noted.

\_\_\_\_\_\_ The document is not accepted.

We fully accept the content within this project artifact and associated tasks.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*<<Insert Name>> <<Insert Date>>*

*<<Insert Title>>*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*<<Insert Name>> <<Insert Date>>*

*<<Insert Title>>*

# Contents

[1. Requirements Change Request Information 5](#_Toc449525642)

[2. Change Control Board Approval Information 6](#_Toc449525643)

# Requirements Change Request Information

*<<This document should be signed by the Program Executive Sponsor and should be reviewed and approved by both the Provider and the Customer Program Manager.>>*

|  |  |  |  |
| --- | --- | --- | --- |
| Program Name |  | | |
| Submitter Name |  | Email |  |
| Date Submitted |  | Date Required By |  |
| FLM Approval Name |  | FLM Approval Date |  |

\*FLM is First Line Manager

|  |  |
| --- | --- |
| CR # | <Enter CR #> |
| Type of Change | <New Requirement, Change to Existing Requirement, Defect> |
| Associated RTM # | <Enter Associated RTM #, if applicable> |
| Priority | <Low, Med, High> |
| Description of Change | <Enter brief description of change> |
| Reason for Change | <Enter reason for change> |
| Potential Application Impact | <Enter potential impact that the change may have on the application> |
| Assumptions and Comments | <Enter any assumptions and additional comments that could be useful to the approvers> |

|  |  |
| --- | --- |
| Est. # of hours to Implement | <Enter the number of hours it will take to complete the change> |
| Est. Cost Impact to Project | <Enter any cost impact of the change> |
| Est. Schedule Impact | <Enter any schedule impact the change may have to the project> |
| Overall Scope Impact | <Enter any scope impact of the change> |
| Change Solution Description | <Enter a brief solution description of the change> |

# Change Control Board Approval Information

|  |  |
| --- | --- |
| Board Decision | <Approved, Rejected, More information> |
| Board Approver | <Name of person who has rights to approve on behalf of the board> |
| Decision Date | <Enter the decision date> |
| Decision Explanation | <Enter explanation from the board if necessary> |